## IN THE UNITED STATES BANKRUPTCY COURT FOR THE SOUTHERN DISTRICT OF NEW YORK

In re:	Chapter 11
LEHMAN BROTHERS HOLDINGS INC	Case No. 08-13555 (JMP) Jointly Administered
Lehman Brothers Holdings, Inc	Case No. 08-13555
("the Debtor	Claim No.: <u>17543</u>
NOTICE OF TRANSFER OF CLAIM PUR	SUANT TO F.R.B.P. RULE 3001 (E)(2) FOR FILED
	AG, IN THE AMOUNT OF \$8,976,875.56, TO C.V.I
<u>G.V.F. (L</u>	UX) Master S.a.r.l.
Attn: Freisi	sche Pfandbriefbank AG Corporate Department inger Str. 5 .6 Unterschleissheim nany
PLEASE TAKE NOTICE that the transfer of <u>\$8</u> unsecured claim has been transferred to:	8,976,875.56 of the above-captioned general
c/o C Know Farim Cobh Surre	G.V.F. (Lux) Master S.a.r.l. carVal Investors UK Limited vle Hill Park nile Lane am ey KT11 2PD d Kingdom
The evidence of transfer of claim is attache Claims Agent website listing the claim are a	d hereto. A copy of the Proof of Claim and a copy of the attached.
If your objection is not timely filed, the tran on our records in this proceeding.	nsferee will be substituted in your place as the claimant
(FOR CLERK'S OFFICE USE ONLY): This notice was mailed to the first named party, by first class INTERNAL CONTROL NO Copy: (check) Claims Agent Transferee Debtors's Att	

Deputy Clerk

UNITED	STATES	BANKRU	PTCY COUR	T
SOUTHE	RN DIST	RICT OF I	VEW YORK	

In re:

Ch-11 LEHMAN BROTHERS HOLDINGS, INC.

Debtor

Case No. 08-13555

Chapter 11

## NOTICE OF TRANSFER OF CLAIM PURSUANT TO RULE 3001(e)

PLEASE TAKE NOTICE that any and all claims of Doutsche Pfandbriefbank AG ("Assignor") that are scheduled by the Debtor(s) and or filed as an original or amended Proof of Claim against the Debtor(s), including but not limited to the following:

Proof of Claim	Proof of Claim
Amount	No.
\$ 8,976,875.56	17543

have been transferred and assigned to CVI GVF (Lux) Master S.a r.l. ("Assignee"). The signature of Assignor on this document is evidence of the transfer of the claims and all rights thereto.

Assignor hereby waives any notice or hearing requirements imposed by Rule 3001 of the Bankruptcy Rules, and stipulates that an order may be entered recognizing this Assignment as an unconditional assignment and the Assignee herein as the valid owner of the Claim. You are hereby requested to make all future payments and distributions, and to give all notices and other communications, in respect of the Claim to the Assignee.

ASSIGNEE:

CVI GVF (Lux) Master S.a r.l.

Address:

c/o CarVal Investors UK Limited

Knowle Hill Park Fairmile Lane

Cobham: Surrey KT11

England

Signature:

Name:

Title: Date: DAVID SHORT

OPERATIONS MANAGE:

Signature:

Name: Title:

Date:

ASSIGNOR: Deutsche Pfandbriefbank AG Corporate Development Address:

Freisinger Str. 5

85716 Unterschleissheim

Germany

Page 1

United States Bankruptcy Court/Souther, Lehman Brothers Holdings Claims Processing c/o Epiq Bankruptcy Solutions, LLC FDR Station, P.O. Box 5076 New York, NY 10150-5076		PRO	OF OF CLAIM
In Re: Lehman Brothers Holdings Inc., et al. Debtors.	Chapter 11 Case No. 08-13555 (JMP) (Jointly Administered)		ER: 4000004528  - Southern District of New York
Name of Debtor Against Which Claim is Held	Case No. of Debtor		Brothers Holdings Inc., Et Al.
Lehman Brothers Holdings Inc.	08-13555		08-13555 (JMP) 0000017543
NOTE: This form should not be used to make a c after the commencement of the case. A request of may be filed pursuant to HUS, C. § 503. Addit a claim for Lehman Programs Securities (See def	laim for an administrative expense arising or payment of an administrative expense analy, this form should not be used to make inition on recome succ.)		
Name and address of Creditor: (and name and		Check this box to indicate that true claim amends a proviously filed	
different from Creditor)  Deutsche Pfundbriefbank AG		claim.	
Dr. Gottfried von Aulock Legal Department		Court Claim	
Von-der-Tann-Strasse 2 80539 Munich		Number: 8722	
Germany		(If known)	
		Filed on: August 19, 2009	arma de alegado
Telephone number: +49 89 2880-11365 Email	address: gonfried.vonaulock@pfardbriefbank.com		
. Name and address where payment should be s		Check this box if you are aware	
	•	that anyone else has filed a proof of claim relating to your claim. Attach	with the second
		copy of statement giving particulars.  Check this box if you are the	
Telephone number:	Email Address:	debtor or trustee in this case.	·
1. Amount of Claim as of Date Case Flle	d: \$ 8,976,875.56		5. Amount of Claim Entitled to Priority under 11 U.S.C. §507(a). If any portion of
If all or part of your claim is secured, complet item 4.	te Item 4 below; however, if all of your claim	m is unsecured, do not complete	your claim falls in one of the following categories, check the box and state the
If all or part of your claim is entitled to priorit If all or part of your claim qualifies as an Adn	y, complete Item 5.	h)(9) complete Item 6	amount.
☐ Check this box if all or part of your claim	n is based on a Derivative Contract.*	(a)(a); combion min or	Specify the priority of the claim:
<ul> <li>Check this box if all or part of your claim</li> <li>*IF YOUR CLAIM IS BASED ON AMOU</li> </ul>	n is based on a Guarantee.*	A DEBIVATIVE CONTRACT	Domestic support obligations under 11
OR A GUARANTEE OF A DEBTOR, YO FOLLOW THE DIRECTIONS TO COMP SUPPORTING DOCUMENTATION OR Y	u must also log on to <u>http://ww</u> Lete the applicable question	w.lehman-claims.com AND (NAIRE AND UPLOAD	U.S.C. § 507(a)(I)(A) or (a)(1)(B).  Wages, salaries or commissions (up to \$10,950), earned within 180 days before filing
Check this box if claim includes interest itemized statement of interest or additional ch http://www.lehman-claims.com if claim is a b	or other charges in addition to the principal arges. Attach itemized statement of interest ased on a Derivative Contract or Guarante	t or charges to this form or on	of the bankruptcy petition or cessation of the debtor's business, whichever is earlier - 11 U.S.C. § 507(a)(4).
2. Basis for Claim: Guarantee (see attach	hed)	•	Contributions to an employee benefit plan- 11 U.S.C. § 507(a)(5).
(See instruction #2 on reverse side.)	fite and Stand 2 Smith of the same		Up to \$2,425 of deposits toward purchase, lease, or rental of property or services for
3. Last four digits of any number by whi 3a. Debter may have scheduled account	ich creditor identifies debtor: unt as:		personal, family, or household use - 11 U.S.C.
(See instruction #3a on reverse sid 4. Secured Claim (See instruction #4 on n			§ 507(a)(7).  ☐ Taxes or penalties owed to governmental
Check the appropriate box if your claim	is secured by a lien on property or a right	of setoff and provide the requested	units - 11 U.S.C. § 507(a)(8).
information.  Nature of property or right of setoff:	Real Estate Motor Vehicle	☐ Other	U.S.C. § 507(a)
Describe:		• •	
Value of Property: \$	Annual Interest Rate	_%_	Amount entitled to priority:
-	as of time case filed included in secured classifier perfection:	im, if any:	s · · · · · · · · · · · · · · · · · · ·
	Amount Unsecured: \$	•	
Amount of Secured Claim: \$	Administrative Expense under 11 U.S.C	. §503(b)(9): \$	
7. Credits: The amount of all payments on	this claim has been credited for the purpos	e of making this proof of claim.	FOR COURT USE ONLY
8. Documents: Attach redacted copies of an orders, invoices, itemized statements of running	ng accounts, contracts, judgments, mortgag	es and security agreements.	
Attach reducted copies of documents providing on reverse side.) If the documents are voluming	nous, attach a summary.		
DO NOT SEND ORIGINAL DOCUMENT SCANNING.	S. ATTACHED DOCUMENTS MAY I	BE DESTROYED AFTER	FILED / RECEIVED
If the documents are not available, please exp	lain:		
Date: Signature: The purson fi	ling this claim must sign it. Sign and print name	and title, if any, of the creditor or other	000 10 000
person authorized to file thi	s claim and state address and telephone number i	f different from the notice address	2FL T 8 5003
9/18/09//	and Mond	, POA	oth. 18 U.S.C.48§ 152 and 3.571. " 3ULUTIONS, LLC
renaity for presenting fra	nament crown. Fine of the to \$500,000 of the	apparent of up w 2 years, at the	and the second s

Claim Sea 68-13555-mg Doc 5463 Filed 10/13/09 Entered 10/13/09 19:23:31 Main Documentage 1 of 1 Pq 4 of 4

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646 282 2400

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Docket

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## Lehman Brothers Holdings Inc. (Chapter 11)

RANGE ATTACK AND STREET	dules maximum meneral est est est est e				
Claim# 17543	158	Name Starts With		Debtor	
Schedule #		Total Claim Value Equals		Scope Claims and Sched	lules 📆
		Claim Date Range	to		
Order By	Creditor Name		Results Per	Page 10	Search Clear
Cinim#	Sahadula #	Condition blom	Page 1 of 1		Page Go
<b>⊞</b> Claim # ☐ 17543	Schedule #	Creditor Name  DEUTSCHE PFANDBRIEFBANK AG DR. GOTTFRIED VON AULOCK		Total Claim Value \$8,976,875.5 Claim Unsecured Amount: \$8,976,875.5	Page Go
	Schedule #	DEUTSCHE PFANDBRIEFBANK AG DR. GOTTFRIED VON AULOCK LEGAL DEPARTMENT VON-DER-TANN-STRASSE 2 MUNICH, 80539 GERMANY	Page 1 of 1	Total Claim Value \$8,976,875.5	Page Go
	Schedule #	DEUTSCHE PFANDBRIEFBANK AG DR. GOTTFRIED VON AULOCK LEGAL DEPARTMENT VON-DER-TANN-STRASSE 2 MUNICH, 80539	Page 1 of 1	Total Claim Value \$8,976,875.5 Claim Unsecured Amount: \$8,976,875.5	Page Go

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